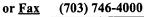
## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together v

applicable fee(s), to: Mail

FEE Mail Stop ISS Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450



INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

appropriate. All further corr indicated unless corrected b maintenance fee notification	elow or directed otherwise	in Block 1, by (a)	specifying	a new correspondence addres	s; and/or (b) indicating a sepa	arate "FEE ADDRESS" for
CURRENT CORRESPONDENCE	E ADDRESS (Note: Use Block 1 for 90 05/12/2005	any change of address)	Fee(s) Transmittal. T	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
FLESHNER & K P.O. BOX 221200 CHANTILLY, VA 06/03/2005 NBEYENE2 00	20153	JUN 0 1 2005	FICE 917	I hereby certify that States Postal Service addressed to the Ma transmitted to the US	ertificate of Mailing or Trans this Fee(s) Transmittal is bein with sufficient postage for final stop ISSUE FEE address PTO (703) 746-4000, on the co	g deposited with the United st class mail in an envelope above, or being facsimile late indicated below.
	1400.00 OP	TO CARE	Y			(Depositor's name)
01 FC:1501 1400.00 OP 7 TRADENTED						(Signature)
					<del> </del>	(Date)
APPLICATION NO.	FILING DATE		FIRST NAME	D INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/748,300	12/31/2003	į.	КуеНу	ung Lee	INTEL-0059	8431
TITLE OF INVENTION: IN	TERPOLATION DELAY	CELL FOR 2PS RI	ESOLUTION	I JITTER INJECTOR IN OPT	ICAL LINK TRANSCEIVER	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400		\$300	\$1700	08/12/2005
EXAMINER		ART UNIT		CLASS-SUBCLASS		
NGUYEN, LINH M		2816		327-261000		
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol>			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	HE PATEN	T (print or type)		
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified by 37 CFR 3.11. Completion	elow, no assignee of this form is NO	data will app Γa substitute	pear on the patent. If an assignor filing an assignment.	gnee is identified below, the c	locument has been filed for
(A) NAME OF ASSIGNEE (B) RES				RESIDENCE: (CITY and STATE OR COUNTRY)		
INTEL CORPORATION Santa Clara, California						
Please check the appropriate	assignee category or catego	ries (will not be pr	inted on the p	patent): 🖵 Individual 🖫	Corporation or other private gr	oup entity Government
4a. The following fee(s) are		4b	. Payment of	` '		
Issue Fee (\$1,4	•	av (\$300 00		in the amount of the fee(s) is end by credit card. Form PTO-202		<b>-</b> #15207)
Advance Order - # of Copies				The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 16-0607 (enclose an extra copy of this form).		
5. Change in Entity Status	(from status indicated above	<del></del>	<b>:</b>	10-0007		···
• •	MALL ENTITY status. See			cant is no longer claiming SM		(6)(1)
The Director of the USPTO i NOTE: The Issue Fee and Pu interest as shown by the reco	is requested to apply the Issublication Fee (if required) virds of the United States Par	ue Fee and Publicate will not be accepted and Trademark	tion Fee (if and I from anyon Office.	ny) or to re-apply any previou e other than the applicant; a re	sly paid issue fee to the applic gistered attorney or agent; or t	ation identified above. he assignee or other party in
Authorized Signature			6/1/205 Date			
Typed or printed name Samuel W. Ntiros			Registration No. 39,318			
This collection of informatio	n is required by 37 CFR 1.3	11. The informatio	n is required	to obtain or retain a benefit by	the public which is to file (an	d by the USPTO to process)

an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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